

# PALLIATIVE CARE and HOSPICE

## What is Palliative Care? (WHO, 2007)

**Palliative care** is an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment, and treatment of pain and other problems – physical, psychosocial and spiritual.

### **Palliative care has the following objectives:**

- provides relief from pain and other distressing symptoms;
- affirms life and regards dying as a normal process;
- intends neither to hasten nor to postpone death;
- integrates the psychological and spiritual aspects of patient care;
- offers a support system to help patients live as actively as possible until death;
- offers a support system to help the family cope during the patient's illness and in their own bereavement;
- uses a team approach to address the needs of patients and their families, including bereavement counselling, if indicated;
- will enhance quality of life, and may also positively influence the course of illness;
- is applicable early in the course of illness, in conjunction with other therapies that are intended to prolong life, such as chemotherapy or radiation therapy;
- includes the investigations needed to better understand and manage distressing clinical complications.

Palliative Care should be provided as needed, to improve the clients' Quality of Life (QOL). Palliative care is not indicated only for those at End of Life (EOL) stage, but to all who need relief from distressing symptoms.

For all patients at EOL stage, who are suffering any distressing symptom, health care providers should offer palliative care to improve comfort as much as possible.

## What is Hospice?

**Hospice care** provides Palliative Care; however, it is only for patients at EOL stage. It is for patients who will not profit from treatment which aims cure, anymore. When treatments aiming cure failed, health care providers can still improve and maintain the best QOL possible for the patient who is dying.

**Hospice care** tries to provide the best quality of life for dying patients. This is done through a holistic approach. It offers spiritual, mental, emotional, and physical comfort to the patients, their families, and their caregivers.

Some people might think using hospice means they're giving up. Others may worry that they won't get the medical care they need. But the service simply focuses on the quality of your life instead of trying to cure a disease.

Health care team include a doctor, nurse, social worker, counselor, chaplain, home health aide, and trained volunteers. They work together to meet the person's physical, emotional, and spiritual needs.

Hospice is for family members, too. It offers counseling and help with practical things such as cleaning house and shopping.

## **Keep in mind:**

When a person is nearing the end of life, effective prevention and relief of symptoms becomes a high priority.

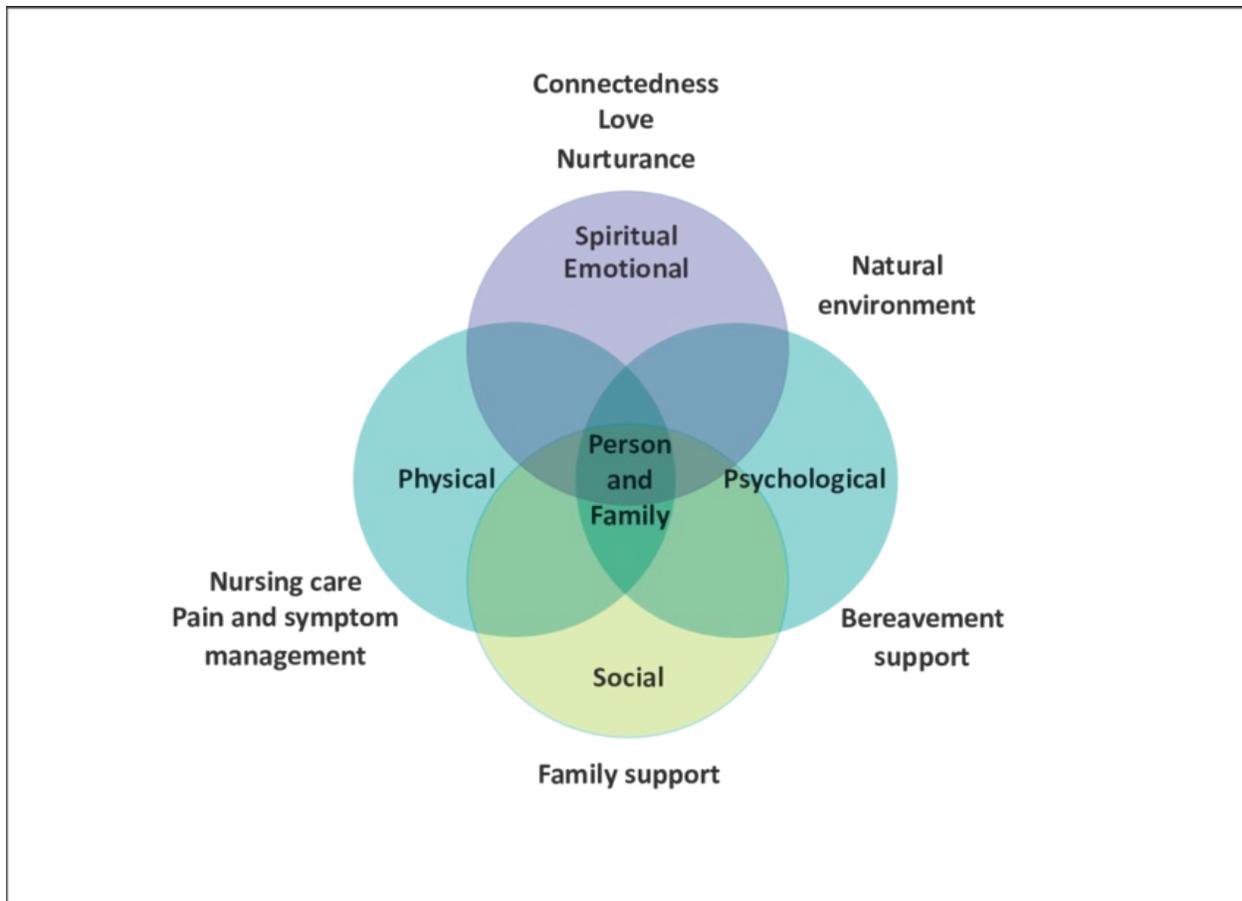
Symptoms are subjective indicators of distress and the primary reason patients seek care, and they remain important even when the underlying causes of illness are increasingly difficult to modify.

Comfort care is an essential part of medical care at the end of life. The goal is to prevent or relieve suffering as much as possible while respecting the dying person's wishes.

## **How do I know someone may be at the End of Life?**

There are some **Common Signs and Symptoms of the End of Life:** (NCI, 2010)

Common symptoms at the end of life include depression, pain, fatigue, coughing, shortness of breath, rattle, nausea and vomiting, delirium, and fever. Bleeding may also occur.



## Goals of End-of-Life Care

- Prevent or relieve suffering
- Provide comfort and support
- Maintain human dignity
- Respect patient's wishes and desires
- Improve quality of life
- Provide emotional support

(National Caregivers Library, 2015)



(Death and Dying, n.d.)